Case 17-35865 Doc 1 Filed 12/01/17 Entered 12/01/17 11:56:26 Desc Main Document Page 1 of 53

Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
NORTHERN DISTRICT OF ILLINOIS		
Case number (if known)	Chapter you are filing under:	
	Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	☐ Chapter 13	Check if this an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

1: Identify Yourself		
	About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
Your full name		
Write the name that is on	Stacey	
your government-issued picture identification (for example, your driver's license or passport).	First name	First name
	Middle name	Middle name
Bring your picture	Lehman	
identification to your meeting with the trustee.	Last name and Suffix (Sr., Jr., II, III)	Last name and Suffix (Sr., Jr., II, III)
All other names you have used in the last 8 years Include your married or	FKA Stacey Rossi	
Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-8048	
	Write the name that is on your government-issued picture identification (for example, your driver's license or passport). Bring your picture identification to your meeting with the trustee. All other names you have used in the last 8 years Include your married or maiden names. Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number	Write the name that is on your government-issued picture identification (for example, your driver's license or passport). Bring your picture identification to your meeting with the trustee. All other names you have used in the last 8 years Include your married or maiden names. Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number Stacey First name Middle name Lehman Last name and Suffix (Sr., Jr., II, III) FKA Stacey Rossi xxx-xx-8048

Case 17-35865 Doc 1 Filed 12/01/17 Entered 12/01/17 11:56:26 Desc Main Document Page 2 of 53

Case number (if known)

Debtor 1 Stacey Lehman

About Debtor 1: About Debtor 2 (Spouse Only in a Joint Case): Any business names and **Employer Identification** Numbers (EIN) you have I have not used any business name or EINs. ☐ I have not used any business name or EINs. used in the last 8 years Include trade names and Business name(s) Business name(s) doing business as names EINs EINs Where you live If Debtor 2 lives at a different address: 25914 W. Rollins Rd. Ingleside, IL 60041 Number, Street, City, State & ZIP Code Number, Street, City, State & ZIP Code Lake County County If your mailing address is different from the one If Debtor 2's mailing address is different from yours, fill it above, fill it in here. Note that the court will send any in here. Note that the court will send any notices to this notices to you at this mailing address. mailing address. Number, P.O. Box, Street, City, State & ZIP Code Number, P.O. Box, Street, City, State & ZIP Code Why you are choosing Check one: Check one: this district to file for bankruptcy Over the last 180 days before filing this petition, I Over the last 180 days before filing this petition, have lived in this district longer than in any other I have lived in this district longer than in any district. other district. I have another reason. I have another reason. Explain. (See 28 U.S.C. § 1408.) Explain. (See 28 U.S.C. § 1408.)

Case 17-35865 Doc 1 Filed 12/01/17 Entered 12/01/17 11:56:26 Desc Main Document Page 3 of 53

Case number (if known) Debtor 1 Stacey Lehman

⊃ar	t 2: Tell the Court About	Your Ba	ankruptcy Ca	ase				
7.	The chapter of the Bankruptcy Code you are				n of each, see <i>Notice Required by</i> of page 1 and check the appropriate	11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy e box.		
	choosing to file under	Chapter 7						
		☐ Ch	napter 11					
		☐ Ch	napter 12					
		☐ Ch	napter 13					
3.	How you will pay the fee	I will pay the entire fee when I file my petition. Please check with the clerk's office in your local court for more details about how you may pay. Typically, if you are paying the fee yourself, you may pay with cash, cashier's check, or money order. If your attorney is submitting your payment on your behalf, your attorney may pay with a credit card or check with a pre-printed address.						
			I need to pay The Filing Fe	y the fee in in ee in Installmei	stallments. If you choose this optionts (Official Form 103A).	on, sign and attach the Application for Individuals to Pay		
but is not required to, waive your fee, and may					vaived (You may request this option e your fee, and may do so only if yo	on only if you are filing for Chapter 7. By law, a judge may, ur income is less than 150% of the official poverty line that		
						n installments). If you choose this option, you must fill out cial Form 103B) and file it with your petition.		
).	Have you filed for	■ No						
	bankruptcy within the last 8 years?	☐ Ye	S.					
			District		When	Case number		
			District		When	Case number		
			District		When	Case number		
10.	Are any bankruptcy	■ No						
	cases pending or being filed by a spouse who is	☐ Ye	S.					
	not filing this case with you, or by a business partner, or by an affiliate?							
			Debtor	-		Relationship to you		
			District		When	Case number, if known		
			Debtor			Relationship to you		
			District		When	Case number, if known		
11.	Do you rent your	■ No	Go to I	ine 12.				
	residence?	☐ Ye		our landlord ob	tained an eviction judgment agains	t you and do you want to stay in your residence?		
		. •	о.	No. Go to line	e 12.	•		
				Yes. Fill out I bankruptcy p		Judgment Against You (Form 101A) and file it with this		

Document Page 4 of 53 Case number (if known) Debtor 1 Stacey Lehman Part 3: Report About Any Businesses You Own as a Sole Proprietor 12. Are you a sole proprietor ■ No. of any full- or part-time Go to Part 4. business? Name and location of business ☐ Yes. A sole proprietorship is a business you operate as Name of business, if any an individual, and is not a separate legal entity such as a corporation, partnership, or LLC. Number, Street, City, State & ZIP Code If you have more than one sole proprietorship, use a separate sheet and attach it to this petition. Check the appropriate box to describe your business: Health Care Business (as defined in 11 U.S.C. § 101(27A)) Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B)) Stockbroker (as defined in 11 U.S.C. § 101(53A)) Commodity Broker (as defined in 11 U.S.C. § 101(6)) None of the above 13. Are you filing under If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set appropriate Chapter 11 of the deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, statement of **Bankruptcy Code and are** operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure you a small business in 11 U.S.C. 1116(1)(B). debtor? I am not filing under Chapter 11. No. For a definition of small business debtor, see 11 I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy □ No. U.S.C. § 101(51D). I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code. ☐ Yes. Part 4: Report if You Own or Have Any Hazardous Property or Any Property That Needs Immediate Attention 14. Do you own or have any ■ No. property that poses or is alleged to pose a threat ☐ Yes. of imminent and What is the hazard? identifiable hazard to public health or safety? Or do you own any If immediate attention is property that needs

immediate attention?

For example, do you own perishable goods, or livestock that must be fed, or a building that needs

urgent repairs?

needed, why is it needed?

Where is the property?

Number, Street, City, State & Zip Code

Debtor 1 Stacey Lehman Page 5 of 53 Case number (if known)

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

15. Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit counseling because of:

Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Deb	tor 1	Stacey Lehman		Document	Page 6 of 53	Case number (if know	vn)		
Par	t 6:	Answer These Questi	ons for Repo	orting Purposes					
	Wha	t kind of debts do have?	16a. A r	<u> </u>			11 U.S.C. § 101(8) as "incurred by an		
	•			No. Go to line 16b.					
			■ Yes. Go to line 17.						
				re your debts primarily business oney for a business or investment of					
				No. Go to line 16c.					
				Yes. Go to line 17.					
			16c. St	ate the type of debts you owe that	are not consumer det	ots or business debts	<u> </u>		
17.		you filing under oter 7?	□ No. I a	m not filing under Chapter 7. Go to	o line 18.				
	after	ou estimate that any exempt erty is excluded and		m filing under Chapter 7. Do you e e paid that funds will be available to			excluded and administrative expenses		
	adm	inistrative expenses paid that funds will		No					
	be a	available for		Yes					
		ibution to unsecured itors?							
18.		low many Creditors do ou estimate that you we?	1 -49		□ 1,000-5,000		25,001-50,000		
	owe?		□ 50-99		☐ 5001-10,000 ☐ 10,001-25,000		☐ 50,001-100,000 ☐ More than100,000		
			☐ 100-199 ☐ 200-999	_	1 0,001-23,000	_	a More marriou,000		
19.		How much do you	\$0 - \$50 ,	000	□ \$1,000,001 - \$10 m	nillion [☐ \$500,000,001 - \$1 billion		
		nate your assets to orth?	\$50,001	Ψ100,000	□ \$10,000,001 - \$50 □ \$50,000,001 - \$100		3 \$1,000,000,001 - \$10 billion 3 \$10,000,000,001 - \$50 billion		
			□ \$100,001 □ \$500,001	Ψ000,000	□ \$100,000,001 - \$100 □ \$100,000,001 - \$50		More than \$50 billion		
20.		much do you	□ \$0 - \$50,	000	□ \$1,000,001 - \$10 m	nillion [3 \$500,000,001 - \$1 billion		
	to be	nate your liabilities e?	\$50,001	ψ. 00,000 F	□ \$10,000,001 - \$50 □ \$50,000,001 - \$100		\$1,000,000,001 - \$10 billion		
			□ \$100,001 □ \$500,001	φουσ,σου	□ \$50,000,001 - \$100 □ \$100,000,001 - \$50	_	3 \$10,000,000,001 - \$50 billion More than \$50 billion		
Par	t 7:	Sign Below							
For	you		I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct.						
					m aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, available under each chapter, and I choose to proceed under Chapter 7.				
				f no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b).					
			I request reli	ef in accordance with the chapter of	of title 11, United State	es Code, specified in	this petition.		
			bankruptcy of and 3571.		ling property, or obtai 000, or imprisonment	ning money or prope for up to 20 years, o	erty by fraud in connection with a r both. 18 U.S.C. §§ 152, 1341, 1519,		
			/s/ Stacey Stacey Lel Signature of	nman	Signa	ture of Debtor 2			
			Executed on	December 1, 2017	Execu	ited on			
				MM / DD / YYYY		MM / DD /	YYYY		

Debtor 1 Stacey Lehman Document Page 7 of 53 Case number (if known)

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

/s/ Tina Tr	an	Date	December 1, 2017
Signature of	Attorney for Debtor		MM / DD / YYYY
Tina Tran			
Printed name			
Needle &	Thread Law LLC		
Firm name			
208 S. Jeff	ferson St.,		
Suite 204			
Chicago, I	L 60661		
Number, Street,	City, State & ZIP Code		
Contact phone	(773) 609-3637	Email address	ttran@needlethreadlaw.com
6321638			
Bar number & S	tate		

		Docume	ent Page 8 of 53	
Fill in this infor	mation to identify your	case:		
Debtor 1	Stacey Lehman			
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS	
Case number				
(if known)				Check if this is an

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

amended filing

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page.

		Your as Value o	ssets f what you own
1.	Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B	\$	0.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$	40,542.00
	1c. Copy line 63, Total of all property on Schedule A/B	\$	40,542.00
Pai	t 2: Summarize Your Liabilities		
			abilities : you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	18,841.00
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$	0.00
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$	32,241.78
	Your total liabilities	\$	51,082.78
Pai	t 3: Summarize Your Income and Expenses		
4.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$	2,796.78
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	2,776.27
Pai	Answer These Questions for Administrative and Statistical Records		
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you	r other sch	edules.
7.	■ Yes What kind of debt do you have?		

household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.

Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to

the court with your other schedules.

Doc 1 Filed 12/01/17 Entered 12/01/17 11:56:26 Desc Main Case 17-35865 Document

Page 9 of 53
Case number (if known) Debtor 1 Stacey Lehman

From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 3,561.96 \$ 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14.

Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total cla	im
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	8,142.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	8,142.00

			Documer	nt Page 10 of 53		
Fill in	this inforn	nation to identify your	case and this filing:			
Debtor	· 1	Stacey Lehman				
		First Name	Middle Name	Last Name		
Debtor (Spouse		First Name	Middle Name	Last Name		
(Spouse	, ii iiiing)	riistivame	Middle Name	Last Name		
United	States Ba	nkruptcy Court for the:	NORTHERN DISTRICT O	F ILLINOIS		
Case r	number					☐ Check if this is an
Ouse i	_					amended filing
						3
O. (4 0 0 A /D				
Offic	ciai Fo	rm 106A/B				
Sch	edul	e A/B: Prop	erty			12/15
hink it i nforma Answer	fits best. Be tion. If more every ques	e as complete and accura e space is needed, attach tion.	ate as possible. If two married a separate sheet to this form	ice. If an asset fits in more than on people are filing together, both are . On the top of any additional page:	e equally responsible for su	pplying correct
Part 1:	Describe	Each Residence, Building	g, Land, or Other Real Estate	You Own or Have an Interest In		
. Do y	ou own or h	ave any legal or equitabl	e interest in any residence, bu	uilding, land, or similar property?		
N/	o. Go to Pari	+2				
_		s the property?				
— 16	es. Where is	s the property?				
Part 2:	Describe '	Your Vehicles				
B. Cars □ N ■ Y	0	ucks, tractors, sport u	illity vehicles, motorcycles	i .		
3.1	Make:	Nissan	Who has an interes	st in the property? Check one	Do not deduct secured cl	aims or exemptions. Put
		Sentra	Debtor 1 only	st in the property : Check one	the amount of any secure Creditors Who Have Clair	
	Widuei.	2016	Debtor 2 only			
	Approximate			ebtor 2 only	Current value of the entire property?	Current value of the portion you own?
	Other inform	nation:	☐ At least one of the	he debtors and another		
			_		¢0 642 00	¢0 642 00
			L Check if this is (see instructions)	community property	\$9,612.00	\$9,612.00
Exam ■ N □ Y	mples: Boar o es d the dolla ges you ha	ts, trailers, motors, pers	onal watercraft, fishing vess you own for all of your ent . Write that number here	al vehicles, other vehicles, and sels, snowmobiles, motorcycle according to the self-self-self-self-self-self-self-self-	cessories	\$9,612.00
			able interest in any of the	following items?		Current value of the
20 y 0		ars any logal or equil	asis interest in any or the	iono anny nomo :	ı	portion you own?
						Do not deduct secured
		ode and furnishings				claims or exemptions.

Household goods and furnishings *Examples:* Major appliances, furniture, linens, china, kitchenware

□ No

Official Form 106A/B Schedule A/B: Property

Entered 12/01/17 11:56:26 Case 17-35865 Filed 12/01/17 Page 11 of 53
Case number (if known) Document Debtor 1 Stacey Lehman Yes. Describe..... \$2,000.00 Furniture 7. Electronics Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices including cell phones, cameras, media players, games □ No Yes. Describe..... \$600.00 Cell Phone 8. Collectibles of value Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles ■ No ☐ Yes. Describe..... 9. Equipment for sports and hobbies Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments ■ No ☐ Yes. Describe..... 10. Firearms Examples: Pistols, rifles, shotguns, ammunition, and related equipment ■ No ☐ Yes. Describe..... 11. Clothes Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories □ No Yes. Describe..... Clothing \$50.00 12. Jewelry Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver ☐ Yes. Describe..... 13. Non-farm animals Examples: Dogs, cats, birds, horses □ No Yes. Describe..... 2 Dogs \$300.00 14. Any other personal and household items you did not already list, including any health aids you did not list No ☐ Yes. Give specific information..... 15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached \$2,950.00 for Part 3. Write that number here Part 4: Describe Your Financial Assets

Do you own or have any legal or equitable interest in any of the following?

Doc 1

Current value of the portion you own? Do not deduct secured

Desc Main

Doc 1 Filed 12/01/17 Entered 12/01/17 11:56:26

Case 17-35865 Desc Main Page 12 of 53
Case number (if known) Document Debtor 1 Stacey Lehman claims or exemptions. 16. Cash Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition □ No ■ Yes..... Cash \$20.00 17. Deposits of money Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each. No ☐ Yes..... Institution name: 18. Bonds, mutual funds, or publicly traded stocks Examples: Bond funds, investment accounts with brokerage firms, money market accounts No Institution or issuer name: ☐ Yes..... 19. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture ■ No ☐ Yes. Give specific information about them..... Name of entity: % of ownership: 20. Government and corporate bonds and other negotiable and non-negotiable instruments Negotiable instruments include personal checks, cashiers' checks, promissory notes, and money orders. Non-negotiable instruments are those you cannot transfer to someone by signing or delivering them. ☐ Yes. Give specific information about them Issuer name: 21. Retirement or pension accounts Examples: Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans □ No Yes. List each account separately. Type of account: Institution name: 401K Colbert Packaging \$1,760,00 22. Security deposits and prepayments Your share of all unused deposits you have made so that you may continue service or use from a company Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others □ No Institution name or individual: ■ Yes. \$1,200.00 Rent **Paul Bialek** 23. Annuities (A contract for a periodic payment of money to you, either for life or for a number of years) ■ No ☐ Yes..... Issuer name and description.

24. Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program.

26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1).

■ No ☐ Yes..... Institution name and description. Separately file the records of any interests.11 U.S.C. § 521(c):

25. Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit

■ No ☐ Yes. Give specific information about them...

Page 13 of 53

Case number (if known) Document Debtor 1 Stacey Lehman 26. Patents, copyrights, trademarks, trade secrets, and other intellectual property Examples: Internet domain names, websites, proceeds from royalties and licensing agreements ☐ Yes. Give specific information about them... 27. Licenses, franchises, and other general intangibles Examples: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses No ☐ Yes. Give specific information about them... Money or property owed to you? Current value of the portion you own? Do not deduct secured claims or exemptions. 28. Tax refunds owed to you No ☐ Yes. Give specific information about them, including whether you already filed the returns and the tax years...... 29. Family support Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement ☐ Yes. Give specific information..... 30. Other amounts someone owes you Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else ■ No ☐ Yes. Give specific information.. 31. Interests in insurance policies Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance □ No Yes. Name the insurance company of each policy and list its value. Company name: Surrender or refund Beneficiary: value: \$25,000.00 **Stacey Lehman** 32. Any interest in property that is due you from someone who has died If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive property because someone has died. No ☐ Yes. Give specific information.. 33. Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment Examples: Accidents, employment disputes, insurance claims, or rights to sue ■ No ☐ Yes. Describe each claim....... 34. Other contingent and unliquidated claims of every nature, including counterclaims of the debtor and rights to set off claims ☐ Yes. Describe each claim....... 35. Any financial assets you did not already list ■ No ☐ Yes. Give specific information.. 36. Add the dollar value of all of your entries from Part 4, including any entries for pages you have attached \$27.980.00

Official Form 106A/B Schedule A/B: Property page 4

for Part 4. Write that number here.....

Case 17-35865

Doc 1

Filed 12/01/17

Entered 12/01/17 11:56:26

Desc Main

		Case 17-35865	Doc 1	Filed 12/01/17 Document	Entered 12 Page 14 of	2/01/17 11:56:26 53 Case number (if known)	Desc Main	
Debt	or 1 _	Stacey Lehman				Case number (if known)		
Part 5	Desci	ribe Any Business-Related	Property You	Own or Have an Interest				
37. D o	o you ow	n or have any legal or equi	itable interest	in any business-related p	roperty?			
	No. Go to	Part 6.						
	Yes. Go	to line 38.						
Part 6		ribe Any Farm- and Comme own or have an interest in fa			n or Have an Interes	st in.		
46. D	o you o	wn or have any legal or	r equitable ir	nterest in any farm- or o	commercial fishir	ng-related property?		
	No. Go	to Part 7.	•	•				
[☐ Yes. 0	So to line 47.						
Part 7	7:	Describe All Property You	Own or Have a	an Interest in That You Did	Not List Above			
E	Example No	ave other property of and as: Season tickets, country ve specific information	y club membe					
54.	Add the	dollar value of all of yo	our entries fr	rom Part 7. Write that n	umber here			\$0.00
Part 8	B: Li	st the Totals of Each Part	of this Form					
55.	Part 1:	Total real estate, line 2						\$0.00
56.	Part 2:	Total vehicles, line 5			\$9,612.00			
57.	Part 3:	Total personal and hous	sehold items	s, line 15	\$2,950.00			
58.	Part 4:	Total financial assets, li	ine 36		\$27,980.00			
59.	Part 5:	Total business-related រុ	property, line	e 45	\$0.00			
60.	Part 6:	Total farm- and fishing-	related prop	erty, line 52	\$0.00			
61.	Part 7:	Total other property not	t listed, line	54 +	\$0.00			
62.	Total pe	ersonal property. Add lir	nes 56 throug	gh 61	\$40,542.00	Copy personal property to	otal\$4	10,542.00
63.	Total of	all property on Schedu	ıle A/B. Add	line 55 + line 62			\$40,5	42.00

Official Form 106A/B Schedule A/B: Property page 5

		IAMAIIII.			
Fill in this infor	mation to identify your	case:			
Debtor 1	Stacey Lehman				
	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS		
Case number					
(if known)				☐ Check if this amended fil	

Official Form 106C

Schedule C: The Property You Claim as Exempt

4/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

- 1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.
 - You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
 - ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)
- 2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

Current value of the portion you own	Amo	Specific laws that allow exemption	
Copy the value from Schedule A/B	Chec	k only one box for each exemption.	
\$9,612.00	•	\$2,400.00	735 ILCS 5/12-1001(c)
		100% of fair market value, up to any applicable statutory limit	
\$2,000.00	•	\$2,000.00	735 ILCS 5/12-1001(b)
		100% of fair market value, up to any applicable statutory limit	
\$600.00		\$600.00	735 ILCS 5/12-1001(b)
		100% of fair market value, up to any applicable statutory limit	
\$50.00	•	\$50.00	735 ILCS 5/12-1001(a)
		100% of fair market value, up to any applicable statutory limit	
\$300.00		\$300.00	735 ILCS 5/12-1001(b)
		100% of fair market value, up to any applicable statutory limit	
	\$9,612.00 \$2,000.00 \$50.00	\$9,612.00	Schedule A/B \$9,612.00 \$2,400.00 100% of fair market value, up to any applicable statutory limit \$600.00 \$50.00 \$100% of fair market value, up to any applicable statutory limit \$600.00 \$100% of fair market value, up to any applicable statutory limit \$50.00 \$100% of fair market value, up to any applicable statutory limit \$50.00 \$100% of fair market value, up to any applicable statutory limit \$50.00 \$100% of fair market value, up to any applicable statutory limit \$50.00 \$100% of fair market value, up to any applicable statutory limit \$300.00 \$300.00

Case 17-35865 Doc 1 Filed 12/01/17 Entered 12/01/17 11:56:26 Desc Main Document Page 16 of 53

Case number (if known)

				` '	
Brief description of the property and line on Schedule A/B that lists this property		Current value of the portion you own	Am	ount of the exemption you claim	Specific laws that allow exemption
		Copy the value from Schedule A/B	Che	eck only one box for each exemption.	
	11K: Colbert Packaging ne from Schedule A/B: 21.1	\$1,760.00	0.00 ■ \$1,760.00		735 ILCS 5/12-1006
LII	le IIIIII Schedule AVD. 21.1			100% of fair market value, up to any applicable statutory limit	
R	eneficiary: Stacey Lehman	\$25,000.00		\$25,000.00	215 ILCS 5/238
	ne from Schedule A/B: 31.1			100% of fair market value, up to any applicable statutory limit	
	□ No	3 years after that for ca	ises fi	,	,
	☐ Yes				

	er (if known). any creditors have claims secure	d by your property?			
I	\square No. Check this box and subr	nit this form to the court with your other schedules. Y	ou have nothing else t	to report on this form.	
	Yes. Fill in all of the informat	•	o o	·	
	1: List All Secured Claims		Column A	Column B	Column C
2. Lis	List All Secured Claims st all secured claims. If a creditor	nas more than one secured claim, list the creditor separately		Column B	Column C
2. Lis	List All Secured Claims st all secured claims. If a creditor ach claim. If more than one creditor		Amount of claim Do not deduct the	Value of collateral that supports this	Unsecured portion
2. Lis	List All Secured Claims st all secured claims. If a creditor l ach claim. If more than one creditor as possible, list the claims in alpha	has more than one secured claim, list the creditor separately has a particular claim, list the other creditors in Part 2. As	Amount of claim	Value of collateral	Unsecured
2. Lis	List All Secured Claims st all secured claims. If a creditor lach claim. If more than one creditor as possible, list the claims in alpha Consumer Portfolio	has more than one secured claim, list the creditor separately has a particular claim, list the other creditors in Part 2. As	Amount of claim Do not deduct the	Value of collateral that supports this	Unsecured portion
2. List for ear much	List All Secured Claims st all secured claims. If a creditor l ach claim. If more than one creditor as possible, list the claims in alpha	has more than one secured claim, list the creditor separately has a particular claim, list the other creditors in Part 2. As betical order according to the creditor's name.	Amount of claim Do not deduct the value of collateral.	Value of collateral that supports this claim	Unsecured portion If any
2. List for ear much	List All Secured Claims st all secured claims. If a creditor lach claim. If more than one creditor as possible, list the claims in alpha Consumer Portfolio Services	has more than one secured claim, list the creditor separately has a particular claim, list the other creditors in Part 2. As betical order according to the creditor's name. Describe the property that secures the claim:	Amount of claim Do not deduct the value of collateral.	Value of collateral that supports this claim	Unsecured portion If any
2. List for ear much	st all secured Claims. If a creditor lach claim. If more than one creditor has possible, list the claims in alpha. Consumer Portfolio Services Creditor's Name	has more than one secured claim, list the creditor separately has a particular claim, list the other creditors in Part 2. As betical order according to the creditor's name. Describe the property that secures the claim: 2016 Nissan Sentra 15000.00 miles	Amount of claim Do not deduct the value of collateral.	Value of collateral that supports this claim	Unsecured portion If any
2. List for ear much	st all secured Claims ach claim. If more than one creditor as possible, list the claims in alpha Consumer Portfolio Services Creditor's Name P.O. Box 57071	has more than one secured claim, list the creditor separately has a particular claim, list the other creditors in Part 2. As betical order according to the creditor's name. Describe the property that secures the claim:	Amount of claim Do not deduct the value of collateral.	Value of collateral that supports this claim	Unsecured portion If any
2. List for ear much	st all secured Claims. If a creditor lach claim. If more than one creditor has possible, list the claims in alpha. Consumer Portfolio Services Creditor's Name	has more than one secured claim, list the creditor separately has a particular claim, list the other creditors in Part 2. As betical order according to the creditor's name. Describe the property that secures the claim: 2016 Nissan Sentra 15000.00 miles As of the date you file, the claim is: Check all that	Amount of claim Do not deduct the value of collateral.	Value of collateral that supports this claim	Unsecured portion If any
2. List for ear much	st all secured Claims ach claim. If more than one creditor as possible, list the claims in alpha Consumer Portfolio Services Creditor's Name P.O. Box 57071	nas more than one secured claim, list the creditor separately has a particular claim, list the other creditors in Part 2. As betical order according to the creditor's name. Describe the property that secures the claim: 2016 Nissan Sentra 15000.00 miles As of the date you file, the claim is: Check all that apply.	Amount of claim Do not deduct the value of collateral.	Value of collateral that supports this claim	Unsecured portion If any
2. List for ear much	List All Secured Claims st all secured claims. If a creditor lach claim. If more than one creditor in as possible, list the claims in alpha Consumer Portfolio Services Creditor's Name P.O. Box 57071 Irvine, CA 92619-7071	nas more than one secured claim, list the creditor separately has a particular claim, list the other creditors in Part 2. As betical order according to the creditor's name. Describe the property that secures the claim: 2016 Nissan Sentra 15000.00 miles As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed	Amount of claim Do not deduct the value of collateral.	Value of collateral that supports this claim	Unsecured portion If any
2. List for ea much	List All Secured Claims st all secured claims. If a creditor lach claim. If more than one creditor in as possible, list the claims in alpha Consumer Portfolio Services Creditor's Name P.O. Box 57071 Irvine, CA 92619-7071	nas more than one secured claim, list the creditor separately has a particular claim, list the other creditors in Part 2. As betical order according to the creditor's name. Describe the property that secures the claim: 2016 Nissan Sentra 15000.00 miles As of the date you file, the claim is: Check all that apply. Contingent Unliquidated	Amount of claim Do not deduct the value of collateral.	Value of collateral that supports this claim	Unsecured portion If any
2. List for ea much 2.1	st all secured Claims st all secured claims. If a creditor lach claim. If more than one creditor in as possible, list the claims in alpha Consumer Portfolio Services Creditor's Name P.O. Box 57071 Irvine, CA 92619-7071 Number, Street, City, State & Zip Code	nas more than one secured claim, list the creditor separately has a particular claim, list the other creditors in Part 2. As betical order according to the creditor's name. Describe the property that secures the claim: 2016 Nissan Sentra 15000.00 miles As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed	Amount of claim Do not deduct the value of collateral. \$18,841.00	Value of collateral that supports this claim	Unsecured portion If any
2. List for each much 2.1	List All Secured Claims st all secured claims. If a creditor lach claim. If more than one creditor as possible, list the claims in alpha Consumer Portfolio Services Creditor's Name P.O. Box 57071 Irvine, CA 92619-7071 Number, Street, City, State & Zip Code of owes the debt? Check one.	Describe the property that secures the claim: 2016 Nissan Sentra 15000.00 miles As of the date you file, the claim is: Check all that apply. Unliquidated Disputed Nature of lien. Check all that apply.	Amount of claim Do not deduct the value of collateral. \$18,841.00	Value of collateral that supports this claim	Unsecured portion If any
Who	List All Secured Claims st all secured claims. If a creditor lach claim. If more than one creditor as possible, list the claims in alpha Consumer Portfolio Services Creditor's Name P.O. Box 57071 Irvine, CA 92619-7071 Number, Street, City, State & Zip Code o owes the debt? Check one. Debtor 1 only Debtor 2 only	Describe the property that secures the claim: 2016 Nissan Sentra 15000.00 miles As of the date you file, the claim is: Check all that apply. Unliquidated Disputed Nature of lien. Check all that apply. An agreement you made (such as mortgage or secar loan)	Amount of claim Do not deduct the value of collateral. \$18,841.00	Value of collateral that supports this claim	Unsecured portion If any
Who	List All Secured Claims st all secured claims. If a creditor lach claim. If more than one creditor in as possible, list the claims in alpha Consumer Portfolio Services Creditor's Name P.O. Box 57071 Irvine, CA 92619-7071 Number, Street, City, State & Zip Code of owes the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only	Describe the property that secures the claim: 2016 Nissan Sentra 15000.00 miles As of the date you file, the claim is: Check all that apply. Unliquidated Disputed Nature of lien. Check all that apply. An agreement you made (such as mortgage or se car loan) Statutory lien (such as tax lien, mechanic's lien)	Amount of claim Do not deduct the value of collateral. \$18,841.00	Value of collateral that supports this claim	Unsecured portion If any
Who D D D A C C C	List All Secured Claims st all secured claims. If a creditor lach claim. If more than one creditor as possible, list the claims in alpha Consumer Portfolio Services Creditor's Name P.O. Box 57071 Irvine, CA 92619-7071 Number, Street, City, State & Zip Code o owes the debt? Check one. Debtor 1 only Debtor 2 only	Describe the property that secures the claim: 2016 Nissan Sentra 15000.00 miles As of the date you file, the claim is: Check all that apply. Unliquidated Disputed Nature of lien. Check all that apply. An agreement you made (such as mortgage or se car loan) Statutory lien (such as tax lien, mechanic's lien)	Amount of claim Do not deduct the value of collateral. \$18,841.00	Value of collateral that supports this claim	Unsecured portion If any

If this is the last page of your form, add the dollar value totals from all pages. Write that number here:

\$18,841.00

Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

	Case 17-55005 L	Document	Page 18	3 of 53	Desc Main
Fill in th	his information to identify your o				
Debtor	1 Stacey Lehman				
20210.	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse if	, filing) First Name	Middle Name	Last Name		
United S	States Bankruptcy Court for the:	NORTHERN DISTRICT OF ILL	INOIS		
Case nu	ımher				
(if known)					☐ Check if this is an
					amended filing
~ <i>(</i> (; .	15 1005/5				
	al Form 106E/F				
Sche	dule E/F: Creditors W	ho Have Unsecured	Claims		12/15
Schedule eft. Attac	e G: Executory Contracts and Unexpi D: Creditors Who Have Claims Secu- th the Continuation Page to this page d case number (if known).	ıred by Property. If more space is n	eeded, copy t	he Part you need, fill it out, numb	per the entries in the boxes on the
Part 1:					
1. Do a	any creditors have priority unsecured	d claims against you?			
I	No. Go to Part 2.				
	es.				
Part 2:	List All of Your NONPRIORIT	Y Unsecured Claims			
3. Do a	any creditors have nonpriority unsec	ured claims against you?			
	No. You have nothing to report in this pa	art. Submit this form to the court with y	our other sche	dules.	
■ Y	es.				
unse	all of your nonpriority unsecured classifications, list the creditor separately one creditor holds a particular claim, list.	for each claim. For each claim listed,	identify what ty	ype of claim it is. Do not list claims a	already included in Part 1. If more
					Total claim
4.1	AT&T U-Verse/AFNI	Last 4 digits of acco	ount number	8501	\$174.76
	Nonpriority Creditor's Name				
	P.O. Box 3097	When was the debt	incurred?	3/14/2017	
_	Bloomington, IL 61702-3097 Number Street City State Zlp Code		ile, the claim is	s: Check all that apply	
	Who incurred the debt? Check one.		,		
	Debtor 1 only	☐ Contingent			
	Debtor 2 only	☐ Unliquidated			
	☐ Debtor 1 and Debtor 2 only	☐ Disputed			
	☐ At least one of the debtors and and	T (NONDRIGHT	TY unsecured	l claim:	
	☐ Check if this claim is for a comm	O4d4.1			
	debt	☐ Obligations arising		ration agreement or divorce that yo	u did not
	Is the claim subject to offset?	report as priority clain			
	No			g plans, and other similar debts	
	Yes	Other. Specify	Cable/Cellu	lar	

Case 17-35865 Doc 1 Filed 12/01/17 Entered 12/01/17 11:56:26 Desc Main Document Page 19 of 53

Debtor 1 Stacey Lehman Case number (if know) 4.2 \$1,461.47 **Capital One Bank** Last 4 digits of account number 3339 Nonpriority Creditor's Name P.O. Box 30281 When was the debt incurred? 1/1/2000 Salt Lake City, UT 84130 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Credit Card ☐ Yes 4.3 Centegra Health System Last 4 digits of account number 0054 \$1,610.49 Nonpriority Creditor's Name P.O. Box 6204 When was the debt incurred? 7/20/2017 Carol Stream, IL 60197-6204 As of the date you file, the claim is: Check all that apply Number Street City State Zlp Code Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes Medical Other, Specify Centegra Health System 4.4 Last 4 digits of account number 0157 \$1,381.00 Nonpriority Creditor's Name P.O. Box 6204 When was the debt incurred? 7/20/2017 Carol Stream, IL 60197-6204 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community $\hfill\square$ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes Medical Other. Specify

Case 17-35865 Doc 1 Filed 12/01/17 Entered 12/01/17 11:56:26 Desc Main Document Page 20 of 53
Case number (if know)

Debtor	1 Stacey Lehman	Case number (if know)	
4.5	Comcast	Last 4 digits of account number	\$645.00
	Nonpriority Creditor's Name	When we the debt in surred 2 4/4/2042	
	1585 Waukegan Rd. Waukegan, IL 60085-6727	When was the debt incurred? 1/1/2012	
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	,	
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	□ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	□ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Cable	
4.6	Credit One	Last 4 digits of account number 0174	\$449.18
	Nonpriority Creditor's Name		
	P.O. Box 60500	When was the debt incurred? 8/4/2016	
	City of Industry, CA 91716-0500 Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	, , , , , , , , , , , , , , , , , , , ,	
	Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	□ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	<u> </u>	☐ Student loans	
	☐ Check if this claim is for a community debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Credit Card	
4.7	Dish Network	Last 4 digits of account number 1853	\$544.10
	Nonpriority Creditor's Name		***************************************
	P.O. Box 94063	When was the debt incurred? 1/23/2017	
	Palatine, IL 60094 Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	As of the date you me, the diam is. Oneck an that apply	
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed Type of NONPRIORITY unsecured claim:	
	☐ At least one of the debtors and another	Student loans	
	☐ Check if this claim is for a community debt	_	
	Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	■ Other Specify Cable	
		- Other. Specify	

Case 17-35865 Doc 1 Filed 12/01/17 Entered 12/01/17 11:56:26 Desc Main Document Page 21_of 53

Debtor 1 Stacey Lehman Case number (if know) Fox Lake Hills Property Owners 8805 \$1,225.00 4.8 Last 4 digits of account number Asso Nonpriority Creditor's Name c/o ACM Processing Center When was the debt incurred? 1/1/2010 P.O. Box 97738 Las Vegas, NV 89193-7738 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent ■ Unliquidated Debtor 2 only Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Propert Association Dues ☐ Yes 4.9 Fox Lake Hills Protection Dist \$907.00 Last 4 digits of account number 3380 Nonpriority Creditor's Name P.O. Box 6253 When was the debt incurred? 7/20/2017 Carol Stream, IL 60197 Number Street City State ZIp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims lacksquare Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes Medical Other. Specify 4.1 Geico Casualty Co. 1550 \$324.66 Last 4 digits of account number Nonpriority Creditor's Name P.O. Box 55126 When was the debt incurred? 11/10/2014 Boston, MA 02205 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No

T Yes

■ Other. Specify Car Insurance

Page 22 of 53 Case number (if know) Document Debtor 1 Stacey Lehman 4.1 **Kohls** 5702 \$654.65 Last 4 digits of account number Nonpriority Creditor's Name P.O. Box 3138 When was the debt incurred? 12/31/2015 Milwaukee, WI 53201-3138 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Charge Account ☐ Yes 4.1 Lakeshore Pathologists 2004 \$22.50 Last 4 digits of account number Nonpriority Creditor's Name 520 E. 22nd St. When was the debt incurred? 1/7/2015 Lombard, IL 60148 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only □ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Yes ■ Other. Specify Medical 4.1 **Lindenhurst Surgery Center** \$1,267,39 1125 Last 4 digits of account number Nonpriority Creditor's Name 1050 Red Oak Lane When was the debt incurred? 1/14/2015 Lake Villa, IL 60046 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims

■ No

☐ Yes

Other. Specify

 $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts

Medical

Case 17-35865 Entered 12/01/17 11:56:26 Doc 1 Filed 12/01/17 Desc Main

Document Page 23 of 53 Debtor 1 Stacey Lehman Case number (if know) 4.1 \$702.00 **Midwest Anes Partners** Last 4 digits of account number 4 Nonpriority Creditor's Name P.O. Box 1123 When was the debt incurred? 1/14/2015 Jackson, MI 49204 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Medical ☐ Yes 4.1 **Prestige Financial** 7952 \$11,135.00 Last 4 digits of account number 5 Nonpriority Creditor's Name P.O. Box 26707 When was the debt incurred? 3/1/2014 Salt Lake City, UT 84126 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No Other. Specify Automobile ☐ Yes 4.1 U.S. Department of Education/GL \$8.142.00 6 Last 4 digits of account number Nonpriority Creditor's Name 2401 International When was the debt incurred? 11/10/2015 P.O. 7859 Madison, WI 53704 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ☐ Contingent ■ Debtor 1 only ■ Unliquidated Debtor 2 only ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim:

debt

■ No

☐ Yes

Student loans

☐ Other. Specify

report as priority claims

 $\hfill\square$ Obligations arising out of a separation agreement or divorce that you did not

lacksquare Debts to pension or profit-sharing plans, and other similar debts

☐ At least one of the debtors and another

Is the claim subject to offset?

☐ Check if this claim is for a community

Document Page 24 of 53 Debtor 1 Stacey Lehman Case number (if know) 4.1 Vista Imaging Association 9441 \$155.01 Last 4 digits of account number Nonpriority Creditor's Name P.O. Box 8453 When was the debt incurred? 1/7/2015 Carol Stream, IL 60197 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No Other. Specify Medical ☐ Yes 4.1 Vista Medical East 0465 \$51.16 Last 4 digits of account number 8 Nonpriority Creditor's Name P.O. Box 504316 When was the debt incurred? 1/14/2015 Saint Louis, MO 63150 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only □ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Medical ☐ Yes 4.1 Vista Medical East 1866 \$213.61 9 Last 4 digits of account number Nonpriority Creditor's Name P.O. Box 504316 When was the debt incurred? 1/14/2015 Saint Louis, MO 63150 As of the date you file, the claim is: Check all that apply Number Street City State Zlp Code Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims

■ No

☐ Yes

Other. Specify

 $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts

Medical

Entered 12/01/17 11:56:26 Case 17-35865 Doc 1 Filed 12/01/17 Desc Main Document Page 25 of 53 Case number (if know) Debtor 1 Stacey Lehman 4.2 Vista Medical East 2110 \$1,175.80 Last 4 digits of account number 0 Nonpriority Creditor's Name P.O. Box 504316 12/5/2016 When was the debt incurred? Saint Louis, MO 63150 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only □ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes Other. Specify Medical Part 3: List Others to Be Notified About a Debt That You Already Listed 5. Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page. Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? **AFNI Inc** Line 4.7 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims P.O. Box 3517 ■ Part 2: Creditors with Nonpriority Unsecured Claims Bloomington, IL 61702-3517 Last 4 digits of account number On which entry in Part 1 or Part 2 did you list the original creditor? Name and Address **AR Resources Inc** Line 4.17 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims P.O. Box 10336 Part 2: Creditors with Nonpriority Unsecured Claims Jacksonville, FL 32247-0336 Last 4 digits of account number Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? AR Resources, Inc. Line 4.17 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims 3107 Spring Glen Rd. #214 Part 2: Creditors with Nonpriority Unsecured Claims Jacksonville, FL 32207 Last 4 digits of account number 9441 Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? **Consumer Portfolio Services** Line 4.15 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims P.O. Box 57071 Part 2: Creditors with Nonpriority Unsecured Claims Irvine, CA 92619-7071 Last 4 digits of account number Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? Convergent Outsourcing Line 4.2 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims P.O. Box 9004 Part 2: Creditors with Nonpriority Unsecured Claims Renton, WA 98057 Last 4 digits of account number Name and Address On which entry in Part 1 or Part 2 did you list the original creditor?

Name and Address Credit Collection Services 725 Canton St. Norwood, MA 02062

Convergent Outsourcing/ LVNV

10750 Hammerly Blvd. #200

Houston, TX 77043

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.10** of (*Check one*):

■ Part 2: Creditors with Nonpriority Unsecured Claims

9693

☐ Part 1: Creditors with Priority Unsecured Claims

Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number 1550

Fundin

Line 4.2 of (Check one):

Last 4 digits of account number

Case 17-35865 Doc 1 Filed 12/01/17 Entered 12/01/17 11:56:26 Desc Main Page 26 of 53 Document Case number (if know) Debtor 1 Stacey Lehman Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? **Credit Solutions** Line 4.1 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims P.O. Box 4115 ■ Part 2: Creditors with Nonpriority Unsecured Claims Concord, CA 94524 Last 4 digits of account number Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? Echostar Satelite Corp Line 4.7 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims 5701 S. Santa Fe Dr. Part 2: Creditors with Nonpriority Unsecured Claims Littleton, CO 80120 Last 4 digits of account number Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? Medical Business Bureau, LLC Line 4.14 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims P.O. Box 1219 ■ Part 2: Creditors with Nonpriority Unsecured Claims Park Ridge, IL 60068-7219 Last 4 digits of account number 2618 Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? Mnet Financial Line 4.13 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims 95 Argonaut. Suite 200 Part 2: Creditors with Nonpriority Unsecured Claims Aliso Viejo, CA 92656-4133 Last 4 digits of account number 6511 Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? PASI Line 4.18 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims P.O. Box 188 Part 2: Creditors with Nonpriority Unsecured Claims Brentwood, TN 37024 Last 4 digits of account number Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? **PASI** Line 4.18 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims P.O. Box 1022 ■ Part 2: Creditors with Nonpriority Unsecured Claims Wixom, MI 48393-1022 Last 4 digits of account number Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? **PASI** Line 4.20 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims P.O. Box 188 ■ Part 2: Creditors with Nonpriority Unsecured Claims Brentwood, TN 37024 Last 4 digits of account number 1866 On which entry in Part 1 or Part 2 did you list the original creditor? Name and Address Stellar Recovery Line 4.7 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims P.O. Box 48370 Part 2: Creditors with Nonpriority Unsecured Claims Jacksonville, FL 32247 Last 4 digits of account number Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? Vista Health System Line 4.18 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims 1324 N. Sheridan Rd. Part 2: Creditors with Nonpriority Unsecured Claims Waukegan, IL 60085 Last 4 digits of account number Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? Vista Health System Line 4.19 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims 1324 N. Sheridan Rd. Part 2: Creditors with Nonpriority Unsecured Claims Waukegan, IL 60085 Last 4 digits of account number Part 4: Add the Amounts for Each Type of Unsecured Claim 6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

				Total Claim
	6a.	Domestic support obligations	6a.	\$ 0.00
Total				
claims				
from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$ 0.00

Case 17-35865 Doc 1 Filed 12/01/17 Entered 12/01/17 11:56:26 Desc Main Document Page 27 of 53

ebtor 1 Stace	y Le	hman	Cas	e nu	mber (if knov	v)
	6c.	Claims for death or personal injury while you were intoxicated	6c.		\$	0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount her	e. 6d	•	\$	0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e	. [\$	0.00
					1	Total Claim
	6f.	Student loans	6f.		\$	8,142.00
Total claims						
m Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	i t 6g		\$	0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h		\$	0.00
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.		\$	24,099.78
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.		\$	32,241.78

		I A A A I I I I I I		
Fill in this infor	rmation to identify your	case:		
Debtor 1	Stacey Lehman			
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States B	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS	
Case number				
(if known)				

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - ☐ No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

Person or company with whom you have the contract or lease
Name, Number, Street, City, State and ZIP Code

2.1 Paul Bialek
7506 Salem Rd.
Wonder Lake, IL 60097

State what the contract or lease is for
Rental

		Documer	nt Page 29 of !	53	
Fill in th	is information to identify your o	case:			
Debtor 1	Stacey Lehman				
	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse if,	filing) First Name	Middle Name	Last Name		
United S	tates Bankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS		
0	anti- an				
Case nu (if known)	mber			_	1 Check if this is an
,				_	amended filing
					J 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
Officia	al Form 106H				
Sche	dule H: Your Code	phtors			12/15
JUITE	dule II. Tour Coul	501013			12/13
people a ill it out,	rs are people or entities who ar re filing together, both are equa and number the entries in the l ne and case number (if known).	ally responsible for suppl boxes on the left. Attach	ying correct information	. If more space is needed, c	opy the Additional Page,
1. D	o you have any codebtors? (If y	ou are filing a joint case, d	o not list either spouse as	a codebtor.	
□и	0				
■ Y	es				
-					
	lithin the last 8 years, have you ona, California, Idaho, Louisiana,				nd territories include
■ N	o. Go to line 3.				
_	es. Did your spouse, former spou	se, or legal equivalent live	with you at the time?		
		, 5 1	,		
in liı Forr	olumn 1, list all of your codebtone 2 again as a codebtor only if m 106D), Schedule E/F (Official Column 2.	that person is a guarante	or or cosigner. Make sur	e you have listed the credite	or on Schedule D (Official
	Column 1: Your codebtor Name, Number, Street, City, State and ZIF	² Code		Column 2: The creditor to v Check all schedules that ap	
3.1	Craig Lehman			Schedule D, line 2.	1
	25914 W. Rollins Rd.			☐ Schedule E/F, line	
	Ingleside, IL 60041			☐ Schedule G	
				Consumer Portfolio Ser	vices
3.2	Craig Lehman			☐ Schedule D, line	_
	25914 W. Rollins Rd.			☐ Schedule E/F, line	
	Ingleside, IL 60041			Schedule G 2.1	
				Paul Bialek	

Case 17-35865 Doc 1 Filed 12/01/17 Entered 12/01/17 11:56:26 Desc Main Document Page 30 of 53

Fill	in this information to identify your ca	ase.							
	otor 1 Stacey Lehr								
	otor 2 ouse, if filing)				_				
Uni	ted States Bankruptcy Court for the	: NORTHERN DISTRIC	CT OF ILLINOIS		_				
(If kr	se number					13 incor	nded filing ement showine as of the		etition chapter date:
	chedule I: Your Inc	ome				MM / DI)/ YYYY		12/1
sup spo atta	as complete and accurate as possiblying correct information. If you use. If you are separated and you ch a separate sheet to this form. Describe Employment	are married and not filing wi	ng jointly, and your spo th you, do not include	ouse i	s livino nation	g with you, in about your	nclude infor spouse. If m	mation a	about your ce is needed,
1.	Fill in your employment information.		Debtor 1			Debte	or 2 or non-	filing sp	ouse
	If you have more than one job,	Employment status	■ Employed			☐ Er	nployed		
	attach a separate page with information about additional	zmproyment status	☐ Not employed				t employed		
	employers.	Occupation	Feeder/Catcher						
	Include part-time, seasonal, or self-employed work.	Employer's name	Colbert Packaging	J					
	Occupation may include student or homemaker, if it applies.	Employer's address	28355 N. Bradley F Lake Forest, IL 600						
		How long employed to	here? 2 years						
Par	t 2: Give Details About Mor	nthly Income							
	mate monthly income as of the dause unless you are separated.	ate you file this form. If	you have nothing to repo	ort for a	any line	e, write \$0 in	he space. Ir	ıclude yo	our non-filing
	u or your non-filing spouse have mo e space, attach a separate sheet to		ombine the information fo	or all e	mploye	ers for that pe	rson on the	lines belo	ow. If you need
					F	or Debtor 1		ebtor 2 o ling spo	
2.	List monthly gross wages, sala deductions). If not paid monthly,			2.	\$_	2,952.0	o \$		N/A
3.	Estimate and list monthly overt	ime pay.		3.	+\$	1,439.1	<u> </u>		N/A

Calculate gross Income. Add line 2 + line 3.

4,391.10

N/A

Case 17-35865 Doc 1 Filed 12/01/17 Entered 12/01/17 11:56:26 Desc Main Document Page 31 of 53

Debt	or 1	Stacey Lehman		Cas	e number (if known)	-			
				Fo	or Debtor 1	For I	Debtor 2	or	
							filing spo		
	Сор	y line 4 here	4.	\$	4,391.10	\$		N/A	
5.	List	all payroll deductions:							
	5a.	Tax, Medicare, and Social Security deductions	5a.	\$	604.00	\$		N/A	
	5b.	Mandatory contributions for retirement plans	5b.	\$	0.00	\$		N/A	
	5c.	Voluntary contributions for retirement plans	5c.	\$	40.00	\$		N/A	
	5d.	Required repayments of retirement fund loans	5d.	\$	0.00	\$		N/A	
	5e.	Insurance	5e.	\$	406.64	\$		N/A	
	5f.	Domestic support obligations	5f.	\$	0.00	\$		N/A	
	5g.	Union dues	5g.	\$	43.47	\$		N/A	
	5h.	Other deductions. Specify: Creditor Garnishment	5h.	+ \$	442.81	+ \$		N/A	
		Vision and Flex Spending		\$	53.00	\$		N/A	
		Uniforms		\$	4.40	\$		N/A	
6.	Add	the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.	\$	1,594.32	\$		N/A	
7.	Calc	culate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$	2,796.78	\$		N/A	
8.	List 8a.	all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly not income.	8a.	\$	0.00	¢		NI/A	
	8b.	monthly net income. Interest and dividends	oa. 8b.		0.00	\$		N/A	
	8c.	Family support payments that you, a non-filing spouse, or a dependent	OD.	Φ.	0.00	Φ		N/A	
	00.	regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c.	\$	0.00	\$		N/A	
	8d.	Unemployment compensation	8d.		0.00	\$		N/A	
	8e.	Social Security	8e.		0.00	\$		N/A	
	8f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:	8f.	\$	0.00	\$		N/A	
	8g.	Pension or retirement income	_ 8g.	\$	0.00	\$		N/A	
	8h.	Other monthly income. Specify:	_ 8h.	+ \$	0.00	+ \$		N/A	
9.	Add	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$_	0.00	\$		N/A	
10.		culate monthly income. Add line 7 + line 9. the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10.	\$	2,796.78 + \$		N/A =	\$	2,796.78
11.	Inclu othe	e all other regular contributions to the expenses that you list in Schedule ade contributions from an unmarried partner, members of your household, your or friends or relatives. not include any amounts already included in lines 2-10 or amounts that are not acify:	depe		•		chedule J. 11. +		0.00
12.		the amount in the last column of line 10 to the amount in line 11. The rese that amount on the Summary of Schedules and Statistical Summary of Certainies					12. \$	S	2,796.78
13.	Do y	ou expect an increase or decrease within the year after you file this form No.	?					ombin onthly	ed income
	_	Ves Evolain:							

Case 17-35865 Doc 1 Filed 12/01/17 Entered 12/01/17 11:56:26 Desc Main Document Page 32 of 53

Fill	in this informa	ition to identify yo	our case:			l			
	tor 1	Stacey Lehm				Che	ck if this is:		
		Otdocy Lenn	iuii				An amended filing		
	otor 2 ouse, if filing)						A supplement show 13 expenses as of	ving postpetition chapter the following date:	
	, 0,		NODTI						
Unit	ed States Bankr	ruptcy Court for the	NORTH		MM / DD / YYYY				
1	e number nown)								
Of	fficial Fo	rm 106J				1			
S	chedule	J: Your I	Exper	ises				12/1	
Be	as complete a	and accurate as	possible. eded, atta	If two married people a ch another sheet to this					
Par		ribe Your House	hold						
1.	Is this a joir								
	■ No. Go to	o line 2. es Debtor 2 live i	n a senar	ate household?					
	□ N		n a sepan	ate nousenoia.					
	_		t file Offici	al Form 106J-2, <i>Expenses</i>	s for Separate House	ehold of Deb	otor 2.		
2.	Do you have	e dependents?	□ No						
	Do not list D Debtor 2.	ebtor 1 and	Fill out this information for each dependent	Dependent's relat Debtor 1 or Debto		Dependent's age	Does dependent live with you?		
	Do not state	the						□ No	
	dependents	names.			Daughter		12	Yes	
					Son		16	□ No ■ Yes	
								□ No	
					Husband		42	Yes	
								□ No	
3.	Do your exp	penses include	_	No				☐ Yes	
		f people other tl d your depende	han _	Yes					
5	<u> </u>			_					
exp	imate your ex		our bankr	y Expenses uptcy filing date unless y y is filed. If this is a sup					
Incl	lude expense	s naid for with r	non-cash	government assistance	if you know				
the		h assistance and		cluded it on Schedule I:			Your exp	enses	
4.		or home owners		ses for your residence.	Include first mortgag	e 4.	\$	1,200.00	
	If not includ	led in line 4:							
	4a. Real e	estate taxes				4a.	\$	0.00	
	4b. Prope	rty, homeowner's				4b.	\$	0.00	
				ipkeep expenses		4c. 4d.	·	0.00	
5.	4d. Homeowner's association or condominium dues Additional mortgage payments for your residence, such as home equity loans						\$ \$	0.00 0.00	

Case 17-35865 Doc 1 Filed 12/01/17 Entered 12/01/17 11:56:26 Desc Main Document Page 33 of 53

Case num	ber (if known)	
6a.	\$	200.00
	·	100.00
	·	335.00
	·	0.00
	·	300.00
	·	
	·	0.00
	·	0.00
	·	0.00
11.	\$	0.00
12	\$	0.00
	·	0.00
	· -	
14.	>	0.00
150	ф	0.00
	·	0.00
	·	0.00
		153.92
15d.	\$	0.00
16.	\$	0.00
	_	
	· · ·	487.35
17b.	\$	0.00
17c.	\$	0.00
17d.	\$	0.00
18.	\$	0.00
	\$	0.00
19.		
dule I: Yo	our Income.	
20a.	\$	0.00
20b.	\$	0.00
20c.	\$	0.00
20d.	\$	0.00
		0.00
	· <u> </u>	0.00
	ΙΨ	0.00
	\$	2,776.27
	\$	<u> </u>
	\$	2 776 27
		2,776.27
	,	
23a.	\$	2,796.78
23b.	-\$	2,776.27
	·	_,
23c.	\$	20.51
	1	
u file this	form?	
		e or decrease because o
	6a. 6b. 6c. 6d. 7. 8. 9. 10. 11. 12. 13. 14. 15a. 15b. 15c. 15d. 17a. 17b. 17d. 18. 19. 20a. 20b. 20c. 20d. 20e. 21. 23a. 23b. 23c. bu file this	9. \$

Case 17-35865 Doc 1 Filed 12/01/17 Entered 12/01/17 11:56:26 Desc Main Document Page 34 of 53

Fill in this infor	mation to identify your	case:			
Debtor 1	Stacey Lehman First Name	Middle Name	Last Name		
Debtor 2	First Name	Middle Name	Last Name		
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS		
Case number (if known)					☐ Check if this is an amended filing
Official Ford		ın Individual	Debtor's Sch	nedules	12/15
If two married p	eople are filing together	r, both are equally respon	sible for supplying corre	ct information.	
obtaining mone		n connection with a bank			ment, concealing property, or 0, or imprisonment for up to 20
Sig	n Below				
Did you pa	y or agree to pay some	one who is NOT an attorr	ney to help you fill out ba	nkruptcy forms?	
■ No					
☐ Yes.	Name of person				ruptcy Petition Preparer's Notice, and Signature (Official Form 119)
	alty of perjury, I declare e true and correct.	that I have read the sumr	nary and schedules filed	with this declaratio	n and
X /s/ Sta	cey Lehman		X		
	/ Lehman		Signature of D	ebtor 2	

Date

Signature of Debtor 1

Date December 1, 2017

Case 17-35865 Doc 1 Filed 12/01/17 Entered 12/01/17 11:56:26 Desc Main Document Page 35 of 53

Fill in	this inform	nation to identify you	r case:			
Debto	or 1	Stacey Lehman				
		First Name	Middle Name	Last Name		
Debto (Spouse	or 2 e if, filing)	First Name	Middle Name	Last Name		
Linited	d States Bar	nkruptcy Court for the:	NORTHERN DISTRICT (OF ILLINOIS		
Office	J States Dai	ikiupicy Court for the.	NORTHERN DISTRICT	JI ILLINOIS		
Case (if know	number					Check if this is an mended filing
	cial For		Affairs for Indivi	duals Filing for B	ankruptcy	4/10
inform numbe	ation. If meer (if known	ore space is needed,). Answer every ques	attach a separate sheet to stion.	this form. On the top of an	equally responsible for sup y additional pages, write you	
Part 1	•	current marital statu	rital Status and Where Yous?	Lived Belore		
	Married Not mar	ried				
2. D	uring the la	st 3 years, have you	lived anywhere other than	where you live now?		
	■ No ■ Yes. List	all of the places you l	ived in the last 3 years. Do n	ot include where you live nov	<i>ı</i> .	
	Debtor 1 Pri	or Address:	dress:	Dates Debtor 2 lived there		
					ity property state or territory ico, Texas, Washington and W	
	■ No ■ Yes. Ma	ke sure you fill out <i>Scl</i>	nedule H: Your Codebtors (O	fficial Form 106H).		
Part 2	Explain	n the Sources of You	r Income			
Fi	ill in the tota	I amount of income yo	u received from all jobs and a	ng a business during this yeall businesses, including part e together, list it only once ur		ndar years?
] No					
	Yes. Fill	in the details.				
			Debtor 1		Debtor 2	
			Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
From January 1 of current year until the date you filed for bankruptcy:			■ Wages, commissions, bonuses, tips	\$4,453.75	☐ Wages, commissions, bonuses, tips	
			☐ Operating a business		☐ Operating a business	

Official Form 107

Page 36 of 53
Case number (if known) Debtor 1 Stacey Lehman

Debtor			Debtor 1	ebtor 1					Debtor 2					
				s of income Il that apply. (before deductions and exclusions)		ns and	Sources of income Check all that apply.				Gross income (before deductions and exclusions)			
	r last calen inuary 1 to	idar year: December 3	31, 2016)		Wages, commissions, \$82,918.00 shuses, tips		918.00	☐ Wages, commissions, bonuses, tips						
				☐ Operati	rating a business				По	☐ Operating a business				
		dar year bef December 3		■ Wages, bonuses, ti	commissions,		\$49,	305.00		ages, co ses, tips	mmissio	ons,		
				☐ Operati	ng a business				ОО	perating	a busine	ess		
	winnings. List each:	If you are filir	ng a joint cas	e and you ha	ntal income; inter ave income that y ch source separat	ou rec	eived togeth	er, list it o	nly onc	e under [Debtor 1		gambling	ана ющегу
				Debtor 1					Debt	or 2				
				Sources of Describe be		eacl (befo	ss income f h source ore deductio lusions)		Sour	ces of in			Gross in (before d and exclu	eductions
Pa	rt 3: Lis	t Certain Pay	ments You	Made Befor	e You Filed for I	Bankru	uptcy							
6.	□ No.	Neither De individual p During the S No. Yes * Subject to	btor 1 nor D rimarily for a 90 days befo Go to line 7 List below e paid that cre not include o adjustment r Debtor 2 o 90 days befo Go to line 7 List below e include payo	rebtor 2 has personal, fare you filed for ach creditor. Do not payments to con 4/01/19 or both have re you filed for ach creditor.	marily consumer primarily consumer primarily consumily, or household for bankruptcy, die to whom you paint include paymen an attorney for thand every 3 years primarily consumer bankruptcy, die to whom you paint to whom you paint mestic support of otcy case.	d you p d a tota ts for d his banl s after t d you p	ebts. Consulose." pay any cred al of \$6,425* domestic sup kruptcy case that for case ebts. pay any cred al of \$600 or	or more in port obligates. Since a total more and	n one o ations, or after	r more passuch as of the date	ore? ayments child sup of adjus	s and the oport an street.	e total amo d alimony.	ount you Also, do
	Creditor	's Name and	·	·	Dates of payme	nt	Total an	nount	Δmo	unt you	Wae	this ne	ayment fo	r
	Orealion	o Hamb allu	Audicaa		Dates of payine		i Jiai ali	paid		till owe	**a5	, and po	ay 1110111 101	

Case 17-35865 Doc 1 Filed 12/01/17 Entered 12/01/17 11:56:26 Desc Main Document

Page 37 of 53
Case number (if known) Debtor 1 Stacey Lehman

7.	Within 1 year before you filed for bankrupto Insiders include your relatives; any general pa of which you are an officer, director, person in a business you operate as a sole proprietor. 1 alimony.	artners; relatives of any gen control, or owner of 20% o	eral partners; partner partner of their votin	erships of which yog g securities; and a	ou are a genera ny managing a	al partner; corporations gent, including one for
	☐ Yes. List all payments to an insider.					
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for	this payment
8.	Within 1 year before you filed for bankrupto insider? Include payments on debts guaranteed or cos No		ments or transfer a	any property on a	ccount of a d	ebt that benefited an
	☐ Yes. List all payments to an insider					
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for Include cred	this payment itor's name
Pai	rt 4: Identify Legal Actions, Repossession	ns, and Foreclosures				
9.	Within 1 year before you filed for bankruptor List all such matters, including personal injury modifications, and contract disputes. No Yes. Fill in the details.					
	Case title	Nature of the case			Status of the case	
	Case number		comit of agoine,			
	Credit Control, LLC Assignee Vista Medical Center vs. Stacey Lehman 17 SC 2165	Debt Collection	ection 19th Judicial Circuit, La County, IL Lake County Courthous 18 N. County Rd. Waukegan, IL 60085		☐ On appeal	
10.	Within 1 year before you filed for bankrupte Check all that apply and fill in the details below No. Go to line 11. Yes. Fill in the information below. Creditor Name and Address		erty repossessed, t	foreclosed, garnis	shed, attached	d, seized, or levied?
						property
	Credit Control LLC	Explain what happened Cash	happened		/2017	\$2,796.22
	c/o Blitt and Gaines, P.C. 661 Glenn Ave. Wheeling, IL 60090	☐ Property was repossessed. ☐ Property was foreclosed.				
		■ Property was garnish	ed.			
		☐ Property was attached, seized or levied.				
	Prestige 1420 S. 500W	Nissan Cube 2010		10/6/	/2017	Unknown
	Salt Lake City, UT 84115	 ■ Property was repossessed. □ Property was foreclosed. □ Property was garnished. □ Property was attached, seized or levied. 				
						,

Casa 17-35865 Filed 12/01/17 Entered 12/01/17 11:56:26

		Case 17-33003 D00	, т	Document	Page 38 of 53	11.30.20 Desc	, iviaiii
Del	otor 1	Stacey Lehman		Document	Case number	er (if known)	
11.	accour	90 days before you filed for ban nts or refuse to make a payment o es. Fill in the details.			cluding a bank or financial i	institution, set off any a	amounts from your
	Credi	tor Name and Address		Describe the action the	ne creditor took	Date action was taken	Amount
12.	court-a	a 1 year before you filed for bank appointed receiver, a custodian, o es			perty in the possession of a		efit of creditors, a
Pai		List Certain Gifts and Contribution	ns				
				. 4:4	fte with a total value of more	- 4b-a #C00	
13.	■ N	2 years before you filed for banoes. Fill in the details for each gift.	kruptcy	, did you give any gi	rts with a total value of more	e tnan \$600 per person	?
	Gifts per pe	with a total value of more than \$ erson	600	Describe the gift	s	Dates you gave the gifts	Value
	Perso Addre	on to Whom You Gave the Gift aress:	d				
14.	Within 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of more than \$600 to any charity?						
	■ No	o es. Fill in the details for each gift o	contrib	oution.			
	more Chari	or contributions to charities that than \$600 ty's Name PSS (Number, Street, City, State and ZIP Co		Describe what yo	ou contributed	Dates you contributed	Value
Pai	rt 6:	List Certain Losses					
15.	Within or gam	1 year before you filed for bank hbling?	ruptcy	or since you filed for	bankruptcy, did you lose ar	nything because of the	t, fire, other disaster,
	Descr	ribe the property you lost and the loss occurred	Inclu	ide the amount that ins	coverage for the loss surance has paid. List pending s of Schedule A/B: Property.	Date of your loss	Value of property lost
Pai	rt 7:	List Certain Payments or Transfe	ers				
	Within consu	1 year before you filed for bank Ited about seeking bankruptcy of e any attorneys, bankruptcy petition	r prepa	ring a bankruptcy pe	tition?		rty to anyone you
		es. Fill in the details.					
	Perso Addre	on Who Was Paid ess		Description and transferred	value of any property	Date payment or transfer was	Amount of payment

Person Who Made the Payment, if Not You Needle & Thread Law LLC 208 S. Jefferson St., Suite 204 Chicago, IL 60661 ttran@needlethreadlaw.com

Email or website address

or transfer was made

12/1/2017

Attorney Fees

\$1,035.00

Case 17-35865 Doc 1 Filed 12/01/17 Entered 12/01/17 11:56:26 Desc Main Document Page 39 of 53 Case number (if known)

Debtor 1 Stacey Lehman

17.	Within 1 year before you filed for bankruptcy, d promised to help you deal with your creditors on the promised to help you deal with your creditors on the promise of the p	or to make payments			transfer any proper	ty to anyone who
	Person Who Was Paid Address	Description and va	alue of any prope	rty	Date payment or transfer was made	Amount of payment
	Within 2 years before you filed for bankruptcy, transferred in the ordinary course of your busin Include both outright transfers and transfers made include gifts and transfers that you have already listed No. Yes. Fill in the details.	ness or financial affai as security (such as th	irs?		•	
	Person Who Received Transfer Address Person's relationship to you	Description and va property transferre			y property or eceived or debts nange	Date transfer was made
19.	 Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which you are a beneficiary? (These are often called asset-protection devices.) No Yes. Fill in the details. 					
	Name of trust					Date Transfer was made
Par	List of Certain Financial Accounts, Instru	ıments, Safe Deposit	Boxes, and Stora	nge Units		
	Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred? Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions. No Yes. Fill in the details.					
		ast 4 digits of ecount number	Type of account instrument	clos	account was ed, sold, ed, or sferred	Last balance before closing or transfer
21.	Do you now have, or did you have within 1 year cash, or other valuables? No	r before you filed for l	bankruptcy, any s	safe deposit k	oox or other deposi	tory for securities,
	Yes. Fill in the details. Name of Financial Institution	Who else had acce	es to it?	escribe the co	ontants	Do you still
	Address (Number, Street, City, State and ZIP Code)	Address (Number, Strate and ZIP Code)		escribe the ct	ments	have it?
22.	Have you stored property in a storage unit or p ■ No □ Yes. Fill in the details.	lace other than your	home within 1 ye	ar before you	filed for bankruptc	y?
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	Who else has or hat oit? Address (Number, State and ZIP Code)		escribe the co	ontents	Do you still have it?

Case 17-35865 Doc 1 Filed 12/01/17 Entered 12/01/17 11:56:26 Desc Main Page 40 of 53
Case number (if known) Document

Debtor 1 Stacey Lehman

Par	t 9: Identify Property You Hold or Control for S	Someone Else					
23.	Do you hold or control any property that someone for someone.	ne else owns? Include any prop	erty y	ou borrowed from, are storing for,	or hold in trust		
	No						
	Yes. Fill in the details.						
	Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the property? (Number, Street, City, State and ZIP Code)	De	scribe the property	Value		
Par	tt 10: Give Details About Environmental Informa	ition					
For	the purpose of Part 10, the following definitions a	apply:					
	Environmental law means any federal, state, or l toxic substances, wastes, or material into the ai regulations controlling the cleanup of these sub	r, land, soil, surface water, grou	_	•			
	Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites.						
	Hazardous material means anything an environment hazardous material, pollutant, contaminant, or s		us wa	ste, hazardous substance, toxic s	ubstance,		
Rep	ort all notices, releases, and proceedings that yo	ou know about, regardless of who	en the	ey occurred.			
24.	Has any governmental unit notified you that you	ı may be liable or potentially liab	le und	der or in violation of an environme	ntal law?		
	■ No □ Yes. Fill in the details.						
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State a ZIP Code)	and	Environmental law, if you know it	Date of notice		
25.	Have you notified any governmental unit of any release of hazardous material?						
	■ No □ Yes. Fill in the details.						
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State a ZIP Code)	and	Environmental law, if you know it	Date of notice		
26.	Have you been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders.						
	■ No						
	Yes. Fill in the details.						
	Case Title Case Number	Court or agency Name Address (Number, Street, City, State and ZIP Code)	Na	ture of the case	Status of the case		
Par	t 11: Give Details About Your Business or Con	nections to Any Business					
27.			anv of	the following connections to any	business?		
		Vithin 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business? A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time					
	☐ A member of a limited liability company			•			
	☐ A partner in a partnership			•			
	☐ An officer, director, or managing executi	ive of a corporation					
	☐ An owner of at least 5% of the voting or equity securities of a corporation						

Case 17-35865 Doc 1 Filed 12/01/17 Entered 12/01/17 11:56:26 Desc Main Document Page 41 of 53 Case number (if known)

	No. None of the above applies. Go to F	Part 12.				
	Yes. Check all that apply above and fill in the details below for each business.					
	Business Name	Describe the nature of the business	Employer Identification number			
	Address (Number, Street, City, State and ZIP Code)	Name of accountant or bookkeeper	Do not include Social Security number or ITIN.			
			Dates business existed			
28.	Within 2 years before you filed for bankrupt institutions, creditors, or other parties.	cy, did you give a financial statement to a	nyone about your business? Include all financial			
	No					
	Yes. Fill in the details below.					
	Name Address (Number, Street, City, State and ZIP Code)	Date Issued				
Pai	rt 12: Sign Below					
are with		false statement, concealing property, or o	declare under penalty of perjury that the answers btaining money or property by fraud in connection ars, or both.			
	Stacey Lehman					
	acey Lehman Inature of Debtor 1	Signature of Debtor 2				
Da	December 1, 2017	Date				
Did ■ N	••	nt of Financial Affairs for Individuals Filin	g for Bankruptcy (Official Form 107)?			
Did ■ N	you pay or agree to pay someone who is not	an attorney to help you fill out bankrupto	y forms?			
	••	ptcy Petition Preparer's Notice, Declaration, a	and Signature (Official Form 119).			

Case 17-35865 Doc 1 Filed 12/01/17 Entered 12/01/17 11:56:26 Desc Main Document Page 42 of 53

Fill in this informat	tion to identify your	case:				
Debtor 1	Stacey Lehman First Name	Middle Name		Last Name		
Debtor 2	First Name	Middle Norse		Last Name		
(Spouse if, filing)	First Name	Middle Name		Last Name		
United States Bankr	ruptcy Court for the:	NORTHERN DIST	RICT OF ILL	LINOIS		
Case number						
(if known)						☐ Check if this is an
						amended filing
Official Forn	n 108					
Statement	of Intentio	n for Indiv	iduals	Filing Under Ch	apter 7	12/15
	lual filing under chap	. •	l out this for	m if:		
_	laims secured by you		- 4! 1			
	personal property a orm with the court w			bankruptcy petition or by the	date set for t	he meeting of creditors.
	r is earlier, unless th			use. You must also send copi		
	le are filing together date the form.	in a joint case, bo	th are equall	y responsible for supplying c	orrect informa	ation. Both debtors must
	I accurate as possib name and case nun		needed, atta	ach a separate sheet to this fo	orm. On the to	p of any additional pages,
Part 1: List Your	Creditors Who Have	Secured Claims				
•	•	ert 1 of Schedule D	: Creditors V	Vho Have Claims Secured by I	Property (Offic	cial Form 106D), fill in the
information below Identify the credit	W. tor and the property tl	nat is collateral	What do y	ou intend to do with the prope	erty that	Did you claim the property
			secures a	debt?		as exempt on Schedule C?
Creditor's Con	sumer Portfolio S	ervices	☐ Surrence	der the property.		□ No
name:			□ Retain	the property and redeem it.		_
Description of 2	2016 Nissan Sentra	a 15000.00		the property and enter into a		Yes
•	niles			mation Agreement. the property and [explain]:		
securing debt:				and property and textually.		
	Unexpired Personal		in Schedule	G: Executory Contracts and L	Inexpired Lea	ses (Official Form 106G), fill
in the information b	elow. Do not list rea	I estate leases. Un	expired leas	es are leases that are still in e	ffect; the leas	e period has not yet ended.
You may assume ar	n unexpired persona	I property lease if t	the trustee d	oes not assume it. 11 U.S.C. §	365(p)(2).	
Describe your une	xpired personal prop	perty leases			Will f	the lease be assumed?
l accorla name.	David Dialata					
Lessor's name:	Paul Bialek					No.
					■ Y	'es
Description of lease	d Rental					
Property:						
Part 3: Sign Beld	ow					

Official Form 108

Case 17-35865 Doc 1 Filed 12/01/17 Entered 12/01/17 11:56:26 Desc Main Document Page 43 of 53

Deb	otor 1 S	tacey Lehman	Case number (if known)
Und	er penalt	v of periury. I declare that I have indicate	ed my intention about any property of my estate that secures a debt and any personal
prop	erty that	is subject to an unexpired lease.	v
X		cey Lehman Lehman	Signature of Debtor 2
	,	re of Debtor 1	digitation of boston 2
	Date	December 1, 2017	Date

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:	Liquidation
\$245	filing fee
\$75	administrative fee
+ \$15	trustee surcharge
\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft:

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

+ \$550 administrative fee

\$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes.

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/Bankruptcy/BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list. Case 17-35865 Doc 1 Filed 12/01/17 Entered 12/01/17 11:56:26 Desc Main Document Page 48 of 53

B2030 (Form 2030) (12/15)

United States Bankruptcy Court Northern District of Illinois

In re	Stacey Lehman		Case No.		
		Debtor(s)	Chapter	7	
	DISCLOSURE OF COMPEN	NSATION OF ATTOR	RNEY FOR DE	BTOR(S)	
C	Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(compensation paid to me within one year before the filing be rendered on behalf of the debtor(s) in contemplation of	g of the petition in bankruptcy,	or agreed to be paid	to me, for services ren	dered or to
	For legal services, I have agreed to accept		\$	1,485.00	
	Prior to the filing of this statement I have received			1,035.00	
	Balance Due		\$	450.00	
2. \$	\$ 335.00 of the filing fee has been paid.				
3.	The source of the compensation paid to me was:				
	■ Debtor □ Other (specify):				
4. 7	The source of compensation to be paid to me is:				
	■ Debtor □ Other (specify):				
5.	■ I have not agreed to share the above-disclosed compe	ensation with any other person	unless they are memb	pers and associates of 1	my law firm.
	☐ I have agreed to share the above-disclosed compensations copy of the agreement, together with a list of the name				w firm. A
6.	In return for the above-disclosed fee, I have agreed to re-	nder legal service for all aspect	s of the bankruptcy c	ase, including:	
t	a. Analysis of the debtor's financial situation, and rende b. Preparation and filing of any petition, schedules, state c. Representation of the debtor at the meeting of credito d. [Other provisions as needed]	ement of affairs and plan which	may be required;	-	iptcy;
7. I	By agreement with the debtor(s), the above-disclosed fee	does not include the following	service:		
		CERTIFICATION			
	I certify that the foregoing is a complete statement of any ankruptcy proceeding.	agreement or arrangement for	payment to me for re	epresentation of the del	btor(s) in
D	ecember 1, 2017	/s/ Tina Tran			
D	ate	Tina Tran 632163 Signature of Attorne			
		Needle & Thread	•		
		208 S. Jefferson S Suite 204	St.,		
		Chicago, IL 60661			
			ax: (866) 348-7709)	
		ttran@needlethre Name of law firm	aulaw.com		

United States Bankruptcy Court Northern District of Illinois

In re	Stacey Lehman	Debtor(s)	Case No. Chapter 7	
	VER	IFICATION OF CREDITOR MA		
	V LAX	Number of C		39
	The above-named Debtor(s) h (our) knowledge.	ereby verifies that the list of credito	rs is true and correct	to the best of my
Date:	December 1, 2017	/s/ Stacey Lehman Stacey Lehman Signature of Debtor		

AFNI Inc P.O. Box 3517 Bloomington, IL 61702-3517

AR Resources Inc P.O. Box 10336 Jacksonville, FL 32247-0336

AR Resources, Inc. 3107 Spring Glen Rd. #214 Jacksonville, FL 32207

AT&T U-Verse/AFNI P.O. Box 3097 Bloomington, IL 61702-3097

Capital One Bank P.O. Box 30281 Salt Lake City, UT 84130

Centegra Health System P.O. Box 6204 Carol Stream, IL 60197-6204

Chex System 7805 Hudson Rd. Woodberry, MN 55125

Comcast 1585 Waukegan Rd. Waukegan, IL 60085-6727

Consumer Portfolio Services P.O. Box 57071 Irvine, CA 92619-7071

Convergent Outsourcing P.O. Box 9004 Renton, WA 98057

Convergent Outsourcing/ LVNV Fundin 10750 Hammerly Blvd. #200 Houston, TX 77043

Craig Lehman 25914 W. Rollins Rd. Ingleside, IL 60041

Credit Collection Services 725 Canton St.
Norwood, MA 02062

Credit One P.O. Box 60500 City of Industry, CA 91716-0500

Credit Solutions P.O. Box 4115 Concord, CA 94524

Dish Network P.O. Box 94063 Palatine, IL 60094

Echostar Satelite Corp 5701 S. Santa Fe Dr. Littleton, CO 80120

Equifax Bankruptcy Department P.O. Box 740241 Atlanta, GA 30374

Experian Bankruptcy Department P.O. Box 2002 Allen, TX 75013

Fox Lake Hills Property Owners Asso c/o ACM Processing Center P.O. Box 97738
Las Vegas, NV 89193-7738

Fox Lake Hills Protection Dist P.O. Box 6253 Carol Stream, IL 60197

Geico Casualty Co. P.O. Box 55126 Boston, MA 02205 Kohls
P.O. Box 3138
Milwaukee, WI 53201-3138

Lakeshore Pathologists 520 E. 22nd St. Lombard, IL 60148

Lindenhurst Surgery Center 1050 Red Oak Lane Lake Villa, IL 60046

Medical Business Bureau, LLC P.O. Box 1219
Park Ridge, IL 60068-7219

Midwest Anes Partners P.O. Box 1123 Jackson, MI 49204

Mnet Financial 95 Argonaut. Suite 200 Aliso Viejo, CA 92656-4133

PASI P.O. Box 1022 Wixom, MI 48393-1022

PASI P.O. Box 188 Brentwood, TN 37024

Paul Bialek 7506 Salem Rd. Wonder Lake, IL 60097

Prestige Financial P.O. Box 26707 Salt Lake City, UT 84126

Stellar Recovery P.O. Box 48370 Jacksonville, FL 32247 Synergy attn. Marie Boyd 230 W. Monroe St., Suite 2400 Chicago, IL 60606

Trans Union Bankruptcy Department P.O. Box 1000 Chester, PA 19022

U.S. Department of Education/GL 2401 International P.O. 7859 Madison, WI 53704

Vista Health System 1324 N. Sheridan Rd. Waukegan, IL 60085

Vista Imaging Association P.O. Box 8453 Carol Stream, IL 60197

Vista Medical East P.O. Box 504316 Saint Louis, MO 63150